Date Nov. 27, 2007

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I hereby appoint:			***************************************	····
Practitioners associated with the C	ustomer Number;	229	13	
OR		L		_
Practitioner(s) named below (if mo	re than ten patent p	ractitioners are to be na	amed, then a customer nu	imber must be used):
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as attorney(s) or agent(s) to represent the any and all patent applications assigned of attached to this form in accordance with 3	only to the undersign	e the United States Pat ned according to the US	ent and Trademark Office SPTO assignment records	(USPTO) in connection with s or assignment documents
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OR Firm or	······		***************************************	
Individual Name				
Address				
City		State		Zip
		State		Zip
Country				
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Assignee Name and Address:				······
Transpacific Plasma, LLC				
10th FL1A, No. 207				
Dun Hua N. Road				
Taipel, Taiwan, R.O.C.				
A copy of this form, together with filed in each application in which t the practitioners appointed in this and must identify the application i	his form is used. form if the appo	. The statement un inted practitioner is	der 37 CFR 3.73(b) m authorized to act on	ay be completed by one of
<u> </u>		URE of Assignee of R	~~~~	***************************************

Authorized Person for Transpacific Plasma, LLC Titie Managing Director The second of the second is required by 7 or EF 1.51, 1.20 and 1.33. The information is notwood to obtain or rolls in Second by 10 cent [1.51, 1.62] and 1.52. The information is notwood to obtain or rolls in Second by 10 cent [1.52] and 1.52 cent [1.52] and 1.5

The jattividual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature

Name

Guy L Froulx